



Contractors Professional Liability Application

THE INSURANCE FOR WHICH YOU ARE APPLYING IS WRITTEN ON A CLAIMS MADE AND REPORTED POLICY. ONLY CLAIMS FIRST MADE AGAINST THE INSURED AND REPORTED TO THE COMPANY DURING THE PERIOD OF INSURANCE ARE CONSIDERED FOR COVERAGE, SUBJECT TO POLICY TERMS AND CONDITIONS. THE LIMIT OF LIABILITY TO PAY LOSS WILL BE REDUCED BY, AND MAY BE EXHAUSTED BY CLAIMS EXPENSES

General

1. Legal Name of applicant (to appear on the policy):

2. Primary Address:

City: County:

State: Zip:

Phone: Contact:

(Provide a listing of additional locations via addendum, if applicable)

3. Website:

4. Year established:

5. Legal structure: Corporation LLC/LLP Sole Proprietorship Joint Venture/Other (Please explain):

Personnel

6. Specify personnel per categories below:

Table with 5 columns: Category, Number, Number Licensed, Full-Time, Part-Time. Rows include Architects, Construction Managers, Construction Personnel, Engineers, Land surveyors, Principals, partners, officers, directors, Risk managers, Other, Total.

7. Has the applicant entered into any joint ventures? Yes No

If yes, please provide full details in addendum to this application, including details on the JV's separate insurance program, if applicable.

7. Does the applicant require evidence of professional liability insurance from all joint venture partners? Yes No

8. Is the applicant a general contractor? Yes No

9. Is the applicant a specialty contractor? Yes No

10. What percentage of gross revenues are derived from repeat clients? %

11. What percentage of gross revenues are derived from the applicant's largest client? %

12. What percentage of the applicant's projects are outside the United States? %

Please list the countries:

Construction Values and Revenue

13. Specify revenues per categories below (gross revenue should include reimbursable expenses and fees paid to subcontractors)

Activity	Current year estimate: (20__)		Last fiscal year: (20__)	
	Construction Values	Professional Fees	Construction Values	Professional Fees
Construction / general contracting only – NO DESIGN				
Construction management - AGENCY				
Construction management – AT RISK				
Design-Build with in-house design				
Design-Build with subcontracted design				
Design / Consulting only				
Design / Consulting with construction observation/review				
Permanently abandoned projects				
Separately insured projects				
Other income				
Total				

14. Specify percentage of gross revenues from services performed in-house and by sub-contractors, derived from categories below (must equal 100%).

Carpentry		Metal Erection	
Concrete		Mining	
Construction Management - Agency		Naval/Marine/Piers/Dredging	
Construction Management - At Risk		Painting	
Crane Testing		Paving	
Demolition		Plumbing	
Design/Build		Rigging	
Drilling		Roofing	
Drywall		Soil Excavation & Grading	
Electrical		Street & Road	
Environmental remediation		Tunneling	
Fencing		Underground utility locating	
Landscaping		Other/Artisan	
Maintenance & Janitorial		Other	
Mechanical/HVAC		TOTAL:	100%

15. Please specify percentage of gross revenue derived from categories below (must equal 100%)

Aircraft/Aerospace		Mines, tunnels & shafts	
Airports		Nuclear plants	
Amusement rides		Offshore risks, including pipelines, platforms & storage	
Apartments		Power plants	
Auditoriums		Residential	
Bridges long span - over 150 ft		Residential - Condominiums and Townhomes	
Bridges under 150 ft.		Residential - Custom (>\$2.5m value)	
Commercial buildings (up to 12 stories)		Residential - Tract (>10 units of the same design)	
Commercial Buildings - High-rise (12 – 40 stories)		Schools & colleges	
Commercial Buildings - Skyscrapers (over 40 stories)		Shopping centers	
Convention centers		Sports/Entertainment stadiums, arenas & venues.	
Dams		Street and road structures	
Ethanol plants		Superfund pollution	
Harbors & piers		Swimming Pools	
Hospitals		Utilities	
Hotels		Warehouses	
Industrial & manufacturing facilities		Water & wastewater treatment plants	
Jails & correctional facilities		OTHER:	
Landfills		OTHER:	
Landmark or iconic buildings		TOTAL:	100%
Mass transit & Railroads			

16. In the past five years, has the applicant or any predecessor firm or other insured provided any services on residential condominium or townhouse projects? Yes No

If yes, provide details on Scope of Services, Construction Values, Firm’s Revenues, and completion date for each.

17. Please provide details of the applicant’s five largest projects undertaken in the past five years:

Name					
City, State & Country					
Client					
Project Type					
Services Performed					
Construction value					
Gross Revenue					

18. Microbial exposure

- a. Are materials inspected for water damage and mold prior to installation? Yes No
- b) Are materials protected to prevent exposure to moisture and vapor? Yes No
- c) Do standard contracts contain a limit of liability clause with respect to mold? Yes No
If yes, what is the limit? \$
- e. Do you have written risk management and QA/QC protocols specific to mold? Yes No

19. Transportation and Disposal

- a. Has the applicant ever been named a Potentially Responsible Party (PRP) in association with a non- owned disposal site? Yes No
- b. Has the applicant had any pollution claims from transported waste or cargo in the last five years? Yes No

If yes to either of the above, please provide full details in addendum to this application

- c. Who is responsible for transporting waste from a job site? Applicant % Third Party %
- d. What percentage of waste or other cargo transported by either the applicant, subcontractor or other third party is Hazardous? %
- e. Please complete the following transport profile:

Type	Number	Description
Heavy Commercial Vehicles		
Light Commercial Vehicles		
Passenger Vehicles		
Specialty Vehicles		
Transported Vehicles		

Contracts

20. Please specify percentage of engagements that are subject to the contract categories below (must equal 100%)

Standard industry contract		Oral agreement	
Applicant’s own standard contract		Purchase order	
Client’s contract		Other	
Letter agreement		Total	100%

- 21. Has the applicant’s standard contracts been reviewed and approved by legal counsel? Yes No
- 22. What percentage of the applicant’s contracts contain a limitation of liability clause? %
- 23. What percentage of the applicant’s contracts contain an alternative dispute resolution (mediation or arbitration) clause? %
- 24. What percentage of the applicant’s contracts have specified payment terms? %
- 25. Does the applicant obtain written approval from clients upon completion of services performed? Yes No
- 26. Does the applicant have procedures for monitoring and collecting outstanding fees? Yes No
- 27. Does the applicant have a policy for resolving disputes with clients over fees or charges? Yes No

Subcontractors

28. What percentage of the applicant’s gross revenue is paid to subcontractors for:

- a) Design %
- b) Construction %
- c) Any other services %

29. What percentage of the applicant’s subcontractors are engaged under a written contract? %

30. Does the applicant require subcontractors to provide evidence of:

- a) Professional Liability Insurance Yes No
- b) General Liability Insurance Yes No
- c) Contractors Pollution Insurance Yes No

31. Does the applicant, or any principal, partner, director or shareholder, or immediate family member of such person have an ownership interest in any entity or project for which services have been, or are to be provided? Yes No
If yes, please provide full details in addendum to this application

Risk Management

32. Does the applicant obtain written approval from clients upon completion of services performed? Yes No

33. Does the applicant have procedures for monitoring and collecting outstanding fees? Yes No

34. Does the applicant have a policy for resolving disputes with clients over fees or charges? Yes No

35. Does the applicant have an in-house program of continuing education for professional employees? Yes No

Liability & Claim Experience

If the answers to any of the questions in this section are “Yes”, please provide a Claim Supplemental form or an addendum to the application which includes full details of the:

- A. Service Provided
- B. Estimate of Potential Liability
- C. Date work performed
- D. Date Claim Made
- E. Claimant or Plaintiff Allegations
- F. Current Status
- G. Amount of Demand
- H. Insurance Company Payments & Reserves (defense and indemnity)
- I. Narrative describing corrective actions or procedures implemented to mitigate a similar claim or allegation from reoccurring.

36. Have any liability claims been made against the applicant during the past five (5) years? Yes No

37. Does the applicant have knowledge of any fact, circumstance, situation, error, or omission which might reasonably be expected to give rise to a claim against the applicant? Yes No

38. In the past five years:

a. Have any of the applicant’s clients made allegations, or complained about the performance, non- performance, or timeliness of the applicant’s products or services? Yes No

b. Have any of the applicant’s clients refused to pay, stopped paying or requested a refund due to alleged problems with the applicant’s products or services? Yes No

c. Has the applicant brought any suits against its clients from non-payment of fees? Yes No

d. Has the applicant or any of its past or present partners, principals, directors, officers, or employees been the subject of any investigation and/or disciplinary action by any government regulatory agency, certifying body or other supervisory body? Yes No

Insurance History

39. Has any insurer declined, cancelled, or refused to renew any similar insurance for the applicant or predecessor firm? Yes No

40. Is the applicant currently insured under a professional liability policy?

Yes No

If yes, please provide details of all professional liability policies carried in the past five years.

Insurance Company	Period of Insurance	Limit of Liability	Deductible	Premium

41. What is the Retroactive Date on the current/expiring professional liability insurance policy?

42. Provide details on the applicant's current General Liability and Umbrella insurance:

	Insurance Company	Effective Dates	Limits Purchased	Annual Premium
General Liability				
Umbrella				
Workers Comp.			WC Mod:	

Declaration

The applicant hereby represents after inquiry, that information contained herein and in any supplemental applications, addendums or forms required hereby, is true, accurate and complete, and that no material facts have been suppressed or misstated. The applicant acknowledges a continuing obligation to report to the Company as soon as practicable any material changes in all such information, after signing the application and prior to issuance of the policy and acknowledges that the Company shall have the right to withdraw or modify any outstanding quotation and/or authorization or agreement to bind the insurance based upon such changes.

Further, the applicant understands and acknowledges that:

1. If a policy is issued, the Underwriters will have relied upon, as representations, this application, any supplemental applications and addendums, and any other statements furnished to the Company in conjunction with this application, all of which are hereby incorporated by reference into this application and made a part thereof;
2. This application will be the basis of the contract and will be incorporated by reference into and made a part of such policy;
3. The applicant's failure to report to its current insurance company any claim made against it during the current policy period, or act, error, omission or circumstances which the applicant is aware of which may give rise to a claim before the expiration of the current policy may create a lack of coverage for each applicant who had a basis to believe that any such act, error, omission or circumstance might reasonably be expected to be the basis of a claim;
4. The policy applied for provides coverage on a claims made and reported basis and will only apply to claims that are first made against the insured and reported in writing to the Company during the policy period. The limit of liability to pay loss will be reduced by and may be exhausted by claims expenses.

Notwithstanding the above, it is understood and agreed that the completion of this application does not bind the Underwriters to provide coverage, or the applicant to purchase the insurance.

This application must be signed and dated by an authorized officer, principal, or partner of the applicant.

Signature:

Printed Name:

Title:

Date: